

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI**

COMPLAINT

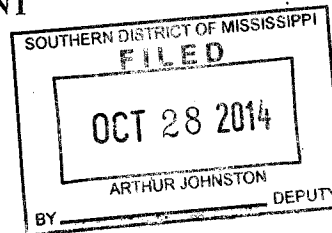
Kennedy 83263
(Last Name) (Identification Number)

Solomza Steve
(First Name) (Middle Name)

State Penitentiary
(Institution)

P.O. Box 1057 Parchman, MS 38938
(Address)

(Enter above the full name of the plaintiff, prisoner, and address
plaintiff in this action)



Ronald King
v.

MR. Filliyan

(Enter above the full name of the defendant or defendants in this action)

CIVIL ACTION NUMBER: 06-CR-011-SC-C
(to be completed by the Court)

3:14cv835-DJFKB

OTHER LAWSUITS FILED BY PLAINTIFF**NOTICE AND WARNING:**

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any other lawsuits in a court of the United States? Yes () No ()
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse side of this page or additional sheets of paper.)
- Parties to the action: OFFICIALS Brutalitys
 - Court (if federal court, name the district; if state court, name the county): RANKIN County.
 - Docket Number: _____
 - Name of judge to whom case was assigned: _____
 - Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?): _____

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank. Do the same for additional plaintiff, if any).

I. Name of plaintiff: Soloman Kennedy Prisoner Number: # 83263
Address: State Penitentiary P.O. Box 1057 Parchman, MS
38738

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions, and places of employment of any additional defendants.)

II. Defendant: Ronald King, Mr. Filliyan is employed as _____
_____ at _____

The plaintiff is responsible for providing the court the name and address of each plaintiff(s) as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME: Soloman S. KENNEDY ADDRESS: P.O. Box 1057
Parchman, MS 38738

DEFENDANT(S):

NAME: Ronald King ADDRESS: P.O. Box 88550
Pearl, MS 39208
MR. Filliyan P.O. Box 88550
Pearl, MS 39208

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
Yes (☒) No (☐)
- B. Are you presently incarcerated for a parole or probation violation?
Yes (☒) No (☐)
- C. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☒) No (☐)
- D. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☒) No (☐)
- E. Have you completed the Administrative Remedy Program regarding the claims presented in this complaint?
Yes (☒) No (☐), if so, state the results of the procedure: _____

- F. If you are not an inmate of the Mississippi Department of Corrections, answer the following questions:
1. Did you present the facts relating to your complaint to the administrative or grievance procedure in your institution?
Yes (☒) No (☐)
 2. State how your claims were presented (written request, verbal request, request for forms): _____

 3. State the date your claims were presented: _____
 4. State the result of the procedure: _____

STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

Cruel and unusual Punishment That Phrase can mean several different things in Prison Facility with No respecting living condition holding calculated Harassment Favoritism, Hated, conflicting unrelated TO Prison Need Through search could Violation The Eighth Amendment. Other Example Cited by The Court including exposure to risk of infection disease unsafe to drinking there water Exposure with dirty deficient Fire Fighting measure. They uphold deprivation OF all and several Canteen. And denial us inmates Television, Visitation, Privileges.

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

\$ 5000000
depressed, sufferings Pains, Poor Medical Treatments, Injuries, infections. Damages. Schizophrenics.

Signed this 21 day of October, 2014 #

Soloman S. Kennedy 83263
P.O. Box 1057 Parchman, MS 38738
Signature of plaintiff, prisoner number and address of plaintiff

I declare under penalty of perjury that the foregoing is true and correct.

10-21-2014
(Date)

Soloman S. Kennedy
Signature of plaintiff